## STATE OF NEW HAMPSHIRE

# PART TIME DENTAL ACTIVE EMPLOYEE PLAN A -UNREPRESENTED (ALL), SEA, TEAMSTERS LOCAL 633, AND NEPBA STATE & EMPLOYEE CONTRIBUTION CHART

EFFECTIVE 01/01/2016

## 30 HOURS TO 31.5 HOURS

DENTAL EE CONTRIBUTION			DENTAL ER C	W RATE	
<u>26PP</u> <u>ANNUAL</u>		<u>26PP</u>	<u>ANNUAL</u>	<u>TOTAL</u>	
DN-1	\$5.44	\$141.44	\$13.76	\$357.76	\$499.20
DN-2	\$10.54	\$274.04	\$26.18	\$680.68	\$954.72
DN-3	\$17.66	\$459.16	\$46.65	\$1,212.90	\$1,672.06

## 32 HOURS TO 34.5 HOURS

DENTAL EE CONTRIBUTION			DENTAL ER C	W RATE	
<u>26PP</u> <u>ANNUAL</u>		<u>26PP</u>	ANNUAL	TOTAL	
DN-1	\$4.58	\$119.08	\$14.62	\$380.12	\$499.20
DN-2	\$8.91	\$231.66	\$27.81	\$723.06	\$954.72
DN-3	\$14.75	\$383.50	\$49.56	\$1,288.56	\$1,672.06

### 35 HOURS TO 37 HOURS

DENTAL EE CONTRIBUTION			DENTAL ER C	W RATE	
26PP ANNUAL		<u>26PP</u>	ANNUAL	TOTAL	
DN-1	\$3.20	\$83.20	\$16.00	\$416.00	\$499.20
DN-2	\$6.29	\$163.54	\$30.43	\$791.18	\$954.72
DN-3	\$10.08	\$262.08	\$54.23	\$1,409.98	\$1,672.06

MONTHLY WORKIN	<u>ANNUAL</u>	
DN-1: 1 PERSON	\$41.59	\$499.08
DN-2: 2 PERSON	\$79.57	\$954.84
DN-3: FAMILY	\$139.34	\$1,672.08

	DENTAL 26 PP					
19.20	20%	3.44	2.00	5.44		
36.72	20%	6.54	4.00	10.54		
64.31	20%	11.66	6.00	17.66		

		DELTA DENTAL						
	COMPANY - STATE SHARE (3023)			EMPLOYEE SHARE (3021/3022)				
WEEKLY HRS RANGE	<u>%</u>	<u>TYPE</u>	PLAN	AMT PER 26 PP	<u>%</u>	TYPE	PLAN	AMT PER 26 PP
30.0	80%	DN	1	13.76	20%	DN	1	\$5.44
		DN	2	26.18		DN	2	\$10.54
(30 to 31.5)		DN	3	46.65		DN	3	\$17.66
32.0 (32 to 34.5)	85%	DN DN DN	1 2 3	14.62 27.81 49.56	15%	DN DN DN	1 2 3	\$4.58 \$8.91 \$14.75
35.0	93%	DN	1	\$16.00	7%	DN	1	\$3.20
		DN	2	\$30.43		DN	2	\$6.29
(35 to 37)		DN	3	\$54.23		DN	3	\$10.08
FULL TIME	100%	DN DN	1 2	\$17.20 \$32.72	0%	DN DN	1 2	\$2.00 \$4.00
(37.5 to >)		DN	3	\$58.31		DN	3	\$6.00